



Atty. Dkt. No. 084437-0184

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Masayuki Ii et al.

Title: SEVERE SEPSIS PREVENTIVE
THERAPEUTIC AGENT

Appl. No.: 10/510,596

International 4/7/2003

Filing Date:

371(c) Date: 8/17/05

Examiner: Shobha KANTAMNENI

Art Unit: 1627

Confirmation

Number: 1802

**NOTICE OF APPEAL FROM THE EXAMINER TO THE BOARD
OF PATENT APPEALS AND INTERFERENCES**

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Applicants hereby appeal to the Board of Patent Appeals and Interferences from the decision of the Examiner in the Final Office Action dated March 1, 2010, and in the Advisory Action dated July 27, 2010, finally rejecting Claims 5 and 21-23.

[] Applicant claims small entity status.

[X] Applicants hereby petition for an extension of time under 37 C.F.R. §1.136(a) for the total number of months checked below:

[X] Notice of Appeal Fee

[X] To be paid as detailed below

[] Not required (Fee paid in prior appeal)

09/01/2010 LNGUYEN1 00000023 10510596

01 FC:1401
02 FC:1253

540.00 OP
980.00 OP

The required fees are calculated below:

<input checked="" type="checkbox"/>	Notice of Appeal Fee	\$540.00
<input checked="" type="checkbox"/>	Extension for response filed within the third month:	\$1,110.00
<input checked="" type="checkbox"/>	Extension Already Obtained for first month:	\$130.00
	FEE TOTAL:	\$1,520.00
<input type="checkbox"/>	Small Entity Fees Apply (subtract ½ of above):	\$0.00
	TOTAL FEE:	\$1,520.00

A credit card payment form in the amount of \$1,520.00 is enclosed.

The Commissioner is hereby authorized to charge any additional fees which may be required regarding this application under 37 C.F.R. §§ 1.16, 1.17 and 41.20, or credit any overpayment, to Deposit Account No. 19-0741. Should no proper payment be enclosed herewith, as by the credit card payment form being unsigned, providing incorrect information resulting in a rejected credit card transaction, or even entirely missing, the Commissioner is authorized to charge the unpaid amount to Deposit Account No. 19-0741.

Please direct all correspondence to the undersigned attorney or agent at the address indicated below.

Respectfully submitted,

Date August 31, 2010

By _____

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